

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004159

Entity Name: LIVING FAITH CHURCH JACKSONVILLE, INC.**Current Principal Place of Business:**6731 RAMONA BOULEVARD
JACKSONVILLE, FL 32205**Current Mailing Address:**P.O. BOX 37149
JACKSONVILLE, FL 32236 US**FEI Number:** 59-3266247**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**YOUNG, WAYNE A
7031 CISCO GARDENS RD W
JACKSONVILLE, FL 32219 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	YOUNG, WAYNE A
Address	7031 CISCO GARDENS RD W
City-State-Zip:	JACKSONVILLE FL 32219

Title	VPD
Name	ADKINS, JAMES D JR.
Address	11400 RAMALLAH RD
City-State-Zip:	JACKSONVILLE FL 32219

Title	DIRECTOR
Name	CRABTREE, JOSEPH P
Address	10107 SANDLERS PRSV CT
City-State-Zip:	JACKSONVILLE FL 32222

Title	TD
Name	BRIM, DARWYN S
Address	6963 POTTSBURG DRIVE
City-State-Zip:	JACKSONVILLE FL

Title	SD
Name	JOHNS, KEVIN W
Address	8890 BROOKSHIRE CT
City-State-Zip:	JACKSONVILLE FL 32257

Title	DIRECTOR
Name	SHELLEY, JOE
Address	1183 BATTLE COVE
City-State-Zip:	JACKSONVILLE FL 32221

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WAYNE A YOUNG**PRES****04/06/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date